

ichthylol and the silver preparations. Ichthylol has a beneficial action, especially in cases of acute gonorrhea in the female, and in my clinics every case of acute vaginitis and vulvitis easily yields to a few applications of tampons dipped in a preparation of ichthylol and glycerin, equal parts. In the subacute and chronic cases, however, the silver preparations are much more desirable. Nitrate of silver in substance, in a thin, flexible rod, so much used in the past years to cauterize the cervical canal, has been nearly discarded in ordinary cases. I reserve this cauterization for cases in which granulations are to be destroyed. In the same way I use strong solutions of the same salt only when the cervix shows excoriations with granulations. Protargol I have found so far to be the best antigonorrheal remedy, and since the time I introduced it in my clinic I have many times spared the patient a curettement of the uterus. Protargol has been used in from 1 to 3 per cent. solution as a urethral injection in cases of urethritis, as an injection into the ducts of the Bartholinian glands when affected, and especially in endocervicitis and endometritis. One of the instruments already referred to, the Talley or the Haynes double tube, has been introduced very gently into the cavity of the womb, care being taken to fill the tube with the fluid before introduction, otherwise some air is carried into the cavity. The instrument being in place, the fluid is pushed out of the syringe very slowly, drop by drop. I leave the catheter in for a short time so as to give the fluid a chance to flow back. Without this precaution, if some of the fluid remains in the body of the uterus, the woman may suffer from cramps and uterine colic. After removing the catheter a tampon is introduced to maintain the fluid in contact with the cervix.

The instillation of protargol into the uterus causes only a sense of heat in the hypogastrium, which lasts about half an hour. From this treatment the results have been exceedingly gratifying. Five to ten applications have been sufficient to bring the womb to its normal condition. Protargol in the beginning increases the discharge, which gradually diminishes, and is reduced to a thin crystalline mucus. As soon as the gonococci have disappeared from the secretion, the instillations with protargol are discontinued, and the woman uses douches of a mild solution of permanganate of potassium or of bicloride of sodium.

So far I cannot agree with Calmann on the superiority of formalin in this treatment, and I find that protargol is safer and more effective in subacute and chronic cases of gonorrheal endometritis. During treatment it is of great importance to watch the menstrual periods. While the woman improves, her menses return to the normal condition, and the accompanying